	MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO 11/13/28 &				FILING DATE OF 16 03		
							CLAIMS						
	ÁS FILED		AFTER 18T	AMENDMENT	AFTER 2ND					•		<u> </u>	
	NO.	DEP	BHD.	DEP	MD	DEP	[MD	DEP	MD	DEP	MD	DE
1			 				51	ļ	 		 	ł	+
2		1/	 	ļ			52	 -	1		 	 	1
3		1:	 	 			54		 -'			1	1
4		+;-	 				55	1					
6		1	 				56						ļ
7		17					57	 	ļ		 	├	
8		1					58	 	 		↓	}	┼
9			<u> </u>				59		 	<u> </u>	 	╂	 -
10			 	 			60	 -	 		 	 	
11		1 /	·	ļ			61 62	-			 	 	1
12	<u> </u>	1-	 				63	 					1
13		1-	 				64						<u> </u>
15	 -	17-	1				65				 	 	
16		1	1				66		 		ļ	 	1
17		1					67				 		
18		1!	4	 			68		 			 	1
19		1 4	- 				70		·		1		1
20		 	-				71	1					
21		1 ;	1				72						<u>. </u>
23		3					73					 	
24		3					74	 			 	ļ	
25		3		<u> </u>			75/		 -		 	ļ -	┼──
26		3		ļ			76					 	+
27		3 8					78		 		1		
28		3	 	 			79						
29 30		3_		ļ ——			80				ļ	 	↓
31		3_	1				81				 	 	
32	1					L	82	ļ			 	 	┼─
33		11:		ļ			83 84		 		 	1	
34		1!-		ļ			85	 	 		1		
35		+-		 			86						
36 37	l	+;-	1	 	l		87				ļ	 	-
38		17					88		 	 	 	 	+
39		1					89	 	 	 -			+
40	1	ļ	<u> </u>	1	<u> </u>	1	90	 			-	1	+-
41		1			ļ	 	91 92	 	 		 	1	1
42		 /	-	-	 -		93						
43		1,-	1	1			94					ļ	1
44 45		 	1				95				ļ		4
46		1	1				96		_	ļ	 	 	
47		1				ļl	97	ļ		 		 	+
48		1		ļ	ļ		98		 		 	1	-
49	<u> </u>	1.		ļ		┼	99	 	 	 	 	1	1
50	<u></u>		 		 	 	100	1			1 .	1	1
AL IND.	L] []] [TOTAL IND.		<u> </u>		↓		
AL DEP.	•			 †			TOTAL DEP	10			,		
AL MS			*MAY				CLAIMS	71				NT of CO nark Office	